

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>DX</i>	70891	5/18
O.I.P.E. CLASSIFIER		16	5-17-99
FORMALITY REVIEW	CM	71632	5/24/99

INDEX OF CLAIMS

✓ ..... Rejected  
 ..... Allowed  
 (Through numeral) ... Canceled  
 ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

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Best Available Copy

If more than 150 claims or 10 actions  
staple additional sheet here